

Submission to the Senate Inquiry into the administration of health practitioner registration by the AHPRA

Written by Pauline Allingham, on behalf of the Australian College of Psychologists (ACP), formerly the Australian College of Clinical Psychologists (ACCP).

Related to term of reference (c) 'impact of AHPRA processes and administration on health practitioners, patients, hospitals and service providers'

This submission will draw attention to the substantial impact of the the Psychology Board of Australia processes on the *Australian College of Psychologists*, formerly the *Australian College of Clinical Psychologists*

Background.

The *Australian College of Clinical Psychologists* was founded in Canberra in 1980 and endorsed as an association on the 27th of July 1987. It is an independent professional association. It was set up to promote the professional development of its members and therefore the provision of high quality psychological services to the public. Since its foundation Branches of the College have formed in Melbourne, Sydney, Brisbane, the Gold Coast and the Riverina.

From its inception the College has had rigorous requirements for membership including 35 hours per year of professional education and an annual case presentation to College members.

When the Mental Health Initiative 2006/2007 was being planned the then ACCP (as well as several other psychologist associations) made representations to the relevant authorities to encourage an inclusive approach to decision making processes. Unfortunately it appears that the decision was made to take the simplest path of assuming that the largest association spoke for all psychologists, and to install the Australian Psychological Society as gatekeeper in deciding which psychologists had the right to be called Clinical psychologists under what became the *Better Access Initiative*.

This iniquitous decision (privileging one association over others) and associated processes (authorizing that one association to be the gatekeeper for all psychologists) has since been adopted by the Psychology Board of Australia where it is used to decide on psychologists' eligibility for endorsement. This is a huge, unjustified and unnecessary extension of a 'two tier' system (ie clinical psychologists and general psychologists) that was set up with relevance only to Medicare item numbers. It now impacts on all psychologists, including those who have never worked in private practice.

Impact on the ACP (formerly ACCP)

The legislation which has been written to assist the Psychology Board of Australia in differentiating between endorsed and non-endorsed psychologists has included appropriating the term 'Clinical Psychologist' for their exclusive use. This was done without consultation with The Australian College of Clinical Psychologists which has been using that descriptor in its name for the past 30 years. (The APS uses the same name for its Clinical College only because they asked permission of the ACCP to do so some years ago.)

Since the legislation was passed removing psychologists' right to use the 'clinical' descriptor, and warning of associated (large) fines for doing so, many members of the then ACCP were concerned that we were risking an expensive legal challenge by continuing to use our own name. This has had a hugely negative impact on our College. Firstly it required us to seek legal advice to try to establish whether we were indeed running such a risk. Secondly the discussions about this advice (which recommended changing our name) have been very divisive. When the decision was taken (via a special general meeting) to change the name, we lost members who felt that we had given in too easily, rather than risk a legal challenge. Changes must now be made to the constitution, to the website, to business cards, to logos, to advertising and to contact lists. In summary it has been, and still is, a time-, energy- and money-consuming exercise which has detracted from the real business of the College.

Even more importantly than all of these practical matters, our College has lost a name that has had thirty years of knowledge, skill, learning and development invested in it, a name that carries a reputation for dedication to excellence in provision of psychological services to patients and clients.

The ACP would like to see an end to these discriminatory practices. The Psychology Board of Australia has been given responsibility by government authority; those tasks that they cannot manage should be given to appropriate government bodies to manage, rather than out-sourcing them to any one professional association.

Pauline Allingham
Public Officer
Australian College of Psychologists
12th April 2011